

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jarrod Barr

Serial No.: 09/927,433

Filing Date: August 10, 2001

Title: MODULAR PACK SYSTEM WITH BELT AND LEG BAGS



Attorney Docket No. SECC-1-1001

Group Art Unit: —

Examiner: —

**PETITION TO REVIVE PATENT APPLICATION – FAILURE TO PAY MISSING
PARTS FEE UNINTENTIONAL (37 C.F.R. §§ 1.137(b) AND 1.316))**

TO THE COMMISSIONER FOR PATENTS:

RECEIVED
JUL 16 2002
OFFICE OF PETITIONS

1. Applicant petitions for revival of this application.
2. Counsel filing this petition has not yet received a notice of abandonment. Nonetheless, it believes such a notice has either issued or is imminent for failure to pay the Missing Parts Fee within the two month period from the date of the Missing Parts Notification.
3. This petition is being filed within three months after the Applicant was first notified of abandonment and within one year of the date of abandonment
4. The entire delay from the due date in paying the required fees until the filing of this petition was unintentional. See the accompanying declaration of the inventor.
5. Check No. 6418 for payment of the Missing Parts fee in the amount of \$1,686 (\$706 filing fee, \$980 fee for five-month extension of time) is enclosed (37 C.F.R. §1.53(b)).
6. A Petition for Extension of Time is enclosed.
7. Check No. 6417 in the amount of \$640 is enclosed for the Petition to Revive a Unintentionally Abandoned Application.
8. Applicant claims small entity status under 37 C.F.R. § 1.27.

Adjustment date: 08/09/2002 AKELLEY
07/15/2002 TRESHH1 00000047 09927433
05 FC:228 -980.00 OP



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PATENT TRADEMARK OFFICE

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SECC-1-1001PET

BLACK LOWE & GRAHAM, PLLC

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Seattle, Washington 98104
206.381.3300 • F: 206.381.3301

08/09/2002 AKELLEY 001192400
Name/Number: 09927433
FC: 704 \$980.00 CR

07/15/2002 TRESHH1 00000047 09927433
04 FC:241 640.00 OP

9. Substitute Drawings in response to the Notice to File Missing Parts are enclosed.
10. Combined Declaration and Power of Attorney is enclosed.
11. Please charge Deposit Account No. 501050 for any fee deficiency or credit this account for any overpayment for this petition. This Petition is enclosed in duplicate.

Respectfully submitted,

BLACK LOWE & GRAHAM^{PLLC}



Lawrence D. Graham
Registration No. 40,001
Direct Dial: 206.381.3304

EXPRESS MAIL CERTIFICATE

I hereby certify that this communication is being deposited with the United States Postal Service via Express Mail No. EL476259405US under 37 C.F.R. § 1.10 on the date indicated below addressed to: Attn: Petition Assistant, Box Petitions, Commissioner for Patents, Washington D.C. 20231.

7-8-02

Date of Deposit



Cora Fedornock



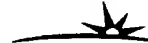
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SECC-1-1001PET

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UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/7/02</u>		2 Serial/Patent # <u>09/927433</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time	5	7/8/02	\$ 980.✓							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ 980							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">1</td> <td style="width: 20px;">0</td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> </tr> </table>			5	0	--	1	0	5	0
5	0	--	1	0	5	0					
10 REASON:											
	Overpayment										
	Duplicate Payment										
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<div style="font-family: cursive; font-size: 1.2em;">EOT outside six-month statutory period. Fee was unnecessary.</div>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Retta Williams</u>		TITLE: <u>Paralegal</u>									
SIGNATURE: <u>Retta Williams</u>		PHONE: <u>306-5594</u>									
OFFICE: <u>Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alissa Kelly</u>		DATE: <u>8/9/02</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**